

LOST RECEIPT

If a duplicate cannot be obtained, for reasonable expenses, the employee/claimant must submit the following signed form with their Travel Claim and/or Expense Claim for reimbursement to the Accounting Office. This form should also be submitted with Corporate Credit Card Statements if receipts have been lost.

PLEASE NOTE: You must fill out one form per lost receipt. This form is not meant to replace obtaining receipts.

Re: Original Receipt

I, _____ hereby declare that I have lost or accidentally destroyed the original receipt. I further declare that I have not and will not use this receipt (if found) to claim reimbursement from any other source, or to support any claim for income tax deductions in the future.

A detailed list of the goods or services purchased is as follows:

Vendor Name: _____
(Name of store, hotel, airline, restaurant, etc.)

Date of Purchase: _____

Amount of Purchase: _____

Description of goods/services purchased: _____

Printed Name of Claimant

Department

Signature of Claimant

Date

Printed Name of Director, Dean or Chair

Signature of Director, Dean or Chair

Date